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PTO/SB/05 (4/98)

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

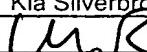
(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. NPA063US

First Inventor or Application Identifier Kia Silverbrook

Title METHOD AND SYSTEM FOR BANKING

Express Mail Label No. EK333430712US

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		<input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification [Total Pages 93] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		6. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 56]		ACCOMPANYING APPLICATION PARTS	
4. Oath or Declaration [Total Pages 3]		7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> <input type="checkbox"/> Attorney	
a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <i>(for continuation/divisional with Box 16 completed)</i>		8. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).		11. <input type="checkbox"/> Preliminary Amendment 12. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> <ul style="list-style-type: none"> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) 13. <input checked="" type="checkbox"/> Status still proper and desired 14. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 15. <input type="checkbox"/> Other: 	
* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).			
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ / _____ Prior application information: Examiner _____			
Group / Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
17. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		24011 <i>(Insert Customer No. or Attach bar code label here)</i>	
or <input type="checkbox"/> Correspondence address below			
Name: Kia Silverbrook Silverbrook Research Pty Ltd			
Address: 393 Darling Street			
City: Balmain		State: NSW	Zip Code: 2041
Country: AUSTRALIA		Telephone: 61-2-9818-6633	Fax: 61-2-9818-6711
Name (Print/Type): Kia Silverbrook		Registration No. (Attorney/Agent): _____	
Signature: 		Date: June 28, 2000	

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement;
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 834)

<i>Complete if Known</i>	
Application Number	
Filing Date	
First Named Inventor	Kia Silverbrook
Examiner Name	
Group / Art Unit	
Attorney Docket No.	NPA063US

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$) Code (\$) Code (\$)	
Deposit Account Number		105 130 205 65	Surcharge - late filing fee or oath
Deposit Account Name		127 50 227 25	Surcharge - late provisional filing fee or cover sheet.
<input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17		139 130 139 130	Non-English specification
2. <input checked="" type="checkbox"/> Payment Enclosed:		147 2,520 147 2,520	For filing a request for reexamination
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		112 920* 112 920*	Requesting publication of SIR prior to Examiner action
FEE CALCULATION			
1. BASIC FILING FEE Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$) Code (\$) Code (\$)			
101 690	201 345	Utility filing fee	345
106 310	206 155	Design filing fee	
107 480	207 240	Plant filing fee	
108 690	208 345	Reissue filing fee	
114 150	214 75	Provisional filing fee	
SUBTOTAL (1) (\$)		345	
2. EXTRA CLAIM FEES Extra Claims Fee from below Fee Paid Total Claims 48 -20** = 28 x 9 = 252 Independent Claims 6 -3** = 3 x 39 = 117 Multiple Dependent _____ = _____			
**or number previously paid, if greater; For Reissues, see below Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Code (\$) Code (\$)			
103 18	203 9	Claims in excess of 20	
102 78	202 39	Independent claims in excess of 3	
104 260	204 130	Multiple dependent claim, if not paid	
109 78	209 39	** Reissue independent claims over original patent	
110 18	210 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)		369	
Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	120

SUBMITTED BY		<i>Complete if applicable</i>		
Name (Print/Type)	Kia Silverbrook	Registration No. (Attorney/Agent)	24011	Telephone 612-9818-6633
Signature	<i>Kia Silverbrook</i>	Date	June 28, 2000	

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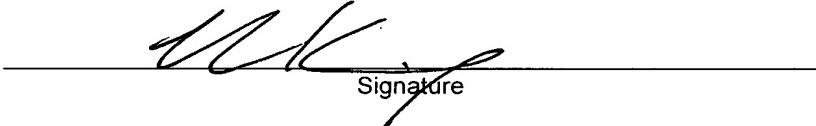
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Submitted herewith Utility Patent Application Transmittal and enclosures for an invention entitled "METHOD AND SYSTEM FOR BANKING".

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